

Parent's Guide to Common Childhood Illnesses

English



AAPCHO

Association of
Asian Pacific
Community Health
Organizations

INTRODUCTION

Colds, fever, diarrhea, vomiting, constipation, earache and nosebleeds commonly occur in childhood. When mild, they can often be treated easily and quickly by parents at home. The following instructions for caring for these problems at home may save you a medical visit. If the suggested steps do not work or the symptoms are severe, please call your health care provider for further advice.

COLDS

Colds are caused by viruses. A child may catch a cold up to five or six times a year. Most colds last 5-10 days. A cold may include sneezing, runny nose, coughing, sore throat, tiredness, and headache. Antibiotics (such as penicillin) do not help unless there is another problem such as tonsillitis or an ear infection.

When to Call Your Health Care Provider

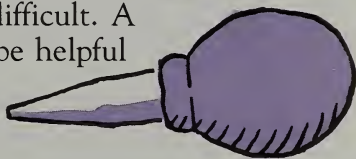
1. A child less than 6 months old with a cold and fever should be seen by your health care provider.
2. If the child seems very irritable, too fussy, or overly tired.
3. If the child has rapid breathing (noticeable), ear pain, severe cough or a sore throat.
4. If a cold lasts more than 3 or 4 days and does not seem to be getting any better, call for advice.



Caring for Colds at Home

The following should help your child feel more comfortable while he or she has a cold:

1. Do not give aspirin to a child without speaking to a health care provider first. The use of aspirin has been shown to be dangerous in some cases of childhood illness. Acetaminophen (Tylenol, Tempra, or Panadol) will help if the child complains of body aches, headaches, or fever.
2. A cool mist vaporizer will help, especially if the child has a cough.
3. In children under one year of age, a plugged nose may make feeding difficult. A nose bulb aspirator may be helpful in sucking out mucous from the baby's nose before feedings. Your health care provider will show you how to use the nasal bulb.
4. If your child has a stuffy nose or cough and is uncomfortable, your health care practitioner may be able to suggest medication you can give him or her.



F E V E R

Fever is a normal response to infection and is not necessarily a cause for alarm. Many children with colds may have a high fever. The important thing is to watch how your child looks and acts. If the child is active, looks relatively well and is taking fluids, then follow the steps under "Caring for a Fever at Home."

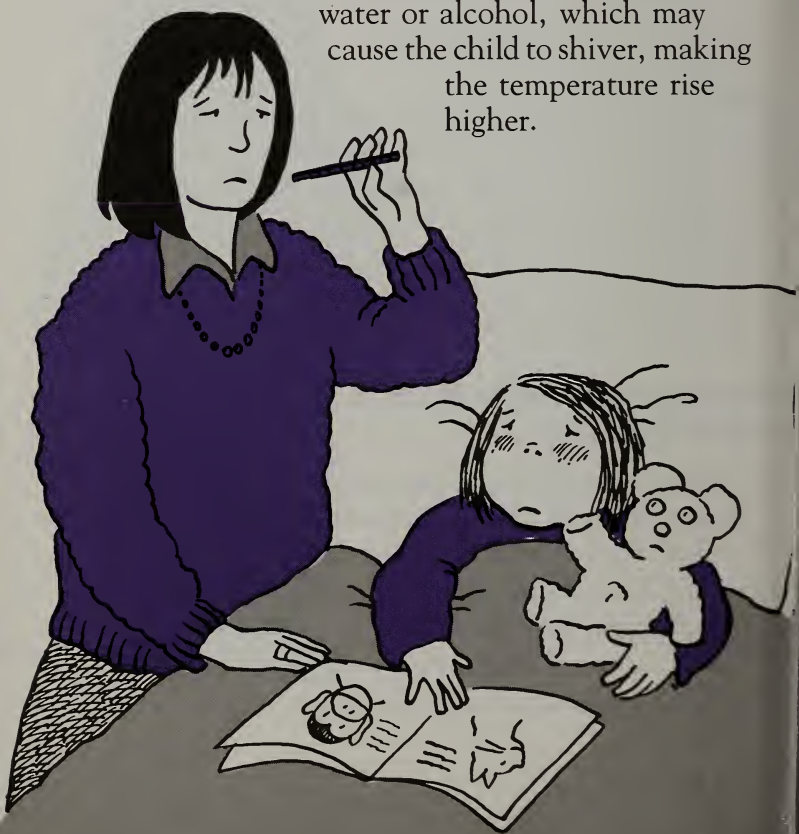
When to Call Your Health Care Provider

1. Any infant under 3 months of age with a rectal temperature of 100.6 or greater should be evaluated by a health care provider.
2. A child 3-12 months of age should be seen by a health care provider if he or she has a temperature of 101F or higher.
3. If fever continues for more than 3 days.

4. If the child acts tired, refuses to drink, has vomiting or seems very fussy.
5. If the child has a chronic health problem.
Ask your health care provider to review the appropriate steps for fever control for your child.
6. If your child has a history of febrile convulsion or if there is a family history of febrile convulsions.

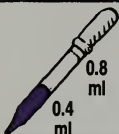
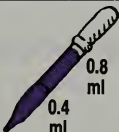
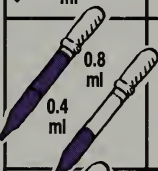
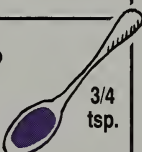
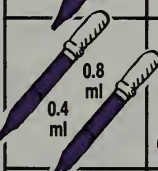
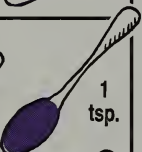
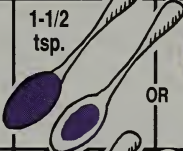

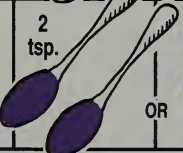

Caring for a Fever at Home

1. Dress your child lightly. Too much clothing will prevent heat loss and increase the fever.
2. Encourage fluids such as water, diluted juices and flat sodas.
3. **Remember to speak to your health care provider first, before giving aspirin to your child.**
Acetaminophen (some brand names are Tylenol, Tempra, and Panadol) can be used to help bring a high temperature down. The medicine comes in different strengths. Read the directions or ask your health care provider for the correct amount to give your child. (See the following Guidelines.)
4. If the temperature remains above 103F despite 2-3 doses of Tylenol, give a sponge bath with lukewarm water for 15 minutes to help bring the fever down. Do not use cold water or alcohol, which may cause the child to shiver, making the temperature rise higher.



Acetaminophen Dosage Guidelines

The following list gives the doses for Acetaminophen Drops (80 mg of medicine in a 0.8 ml dropperful of liquid), Acetaminophen Suspension [example - Tylenol Elixir] (160 mg medicine in 5 ml of liquid) and children's acetaminophen tablets. 1 Dropperful = 0.8 ml medicine. Doses may be given every 4 hours.

	Drops Dosage	Suspension Dosage	Children Tablets Dosage
0-3 Months (6-11 lbs.) ½ Dropperful of Drops			
4-11 Months (12-17 lbs.) 1 Dropperful of Drops			
12-23 Months (18-23 lbs.) 1½ Dropperfuls of Drops or ¾ Teaspoonfuls of Suspension			
2-3 Years (24-35 lbs.) 2 Dropperfuls of Drops or 1 Teaspoonful of Suspension			
4-5 Years (36-47 lbs.) 1½ Teaspoonfuls of Suspension or 3 Children Tablets			
6-8 Years (48-59 lbs.) 2 Teaspoonfuls of Suspension or 4 Children Tablets			

DIARRHEA

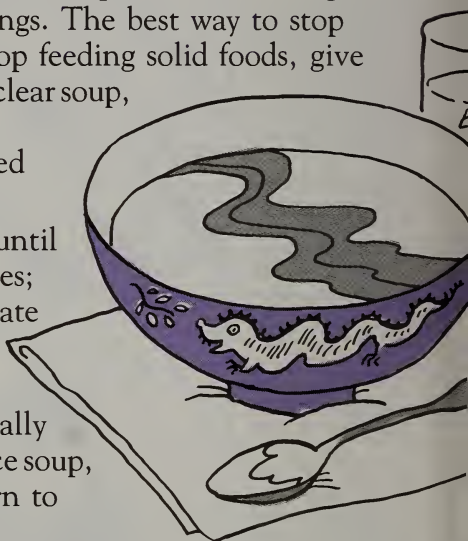
Diarrhea are stools that are watery or loose and occur more often than normal. So, it is important to know your child's normal stool pattern. Some newborn babies may have 7-10 stools a day, while others might have stools only every other day. Yet both are normal, if that is usual for that baby.

When to Call Your Health Care Provider

1. The stools are very bad smelling or there is blood or mucous in the stool. (An occasional green stool is not harmful.)
2. The diarrhea is accompanied by a fever.
3. The child seems overly tired or does not act "right". (Examples: too sleepy or too fussy.)
4. The child has less urine, seems to have a dry mouth or does not have tears when crying.
5. There is severe stomach pain.
6. The baby is under a year old.
7. The diarrhea does not get better even after trying the following suggestions for 2-3 days.

Caring for Diarrhea at Home For Infants

1. In general, diarrhea responds best to large infrequent feedings. The best way to stop diarrhea is to stop feeding solid foods, give only fluids, e.g. clear soup, diluted juice, water, flat diluted soda, etc.
2. Stop cow's milk until diarrhea improves; milk can aggravate the diarrhea.
3. As condition improves, gradually feed soy milk, rice soup, and slowly return to usual feedings.
4. Also, solutions such as Pedialyte are useful in preventing dehydration in infants.



For Children (8 Months and Older)

Follow the above suggestions. In addition, older children may be able to have bland solids once condition improves. Solids such as bananas, rice, applesauce, toast (without butter), rice noodles, and congee/juk (rice gruel).

VOMITING

Vomiting or throwing up can happen for many different reasons. These can include eating food which has gone bad, catching a stomach “bug” or having a cold. Young children can vomit if they get too upset or cry too much. Vomiting is different from “spitting up” which occurs in infants and is usually only in small amounts and happens with burping. Vomiting can also be a symptom of more serious illness. So it is important to check with your health care provider.

When to Call Your Health Care Provider

1. The vomiting happens many times and is “violent.”
2. There is severe stomach pain.
3. If the vomit is bloody or a green color.

If the child seems to be acting “funny” or is overly tired or markedly irritable.

Caring for Vomiting at Home

The treatment for vomiting is much the same as for diarrhea.

1. Do not give any food. Instead, offer the child sips of clear liquids (as described in the Diarrhea section) when he or she feels like drinking. Do not force the child to drink if he or she refuses the liquid.
2. Give a few sips every 10-15 minutes to start, then increase the amount slowly.
3. The child can have small amounts of bland food after vomiting has stopped for half a day.



CONSTIPATION

Constipation is the passing of hard stools, or bowel movements which happen less frequently than normal. Sometimes it is accompanied by stomach pain.

When to Call Your Health Care Provider

1. The child does not have a bowel movement in three days, even after trying the steps below.
2. The child has a fever which does not go down with Acetaminophen.
3. There are some stools, but they have blood in them, or are very bad smelling.
4. The child's stomach pain seems to be uncomfortable.

Caring for Constipation at Home

1. Irregular bowel movement in infants can go on for several days. This is not unusual. Increasing the child's fluid intake will help. If you are concerned, consult with your health care provider.
2. Children over 4 months old can have a glass of clear liquid such as diluted apple juice. Check with your health care provider for other suggested clear liquids.
3. Children old enough to eat table foods should be encouraged to eat more vegetables and fruits.
4. Do not force a child to eat and drink.



E A R A C H E S

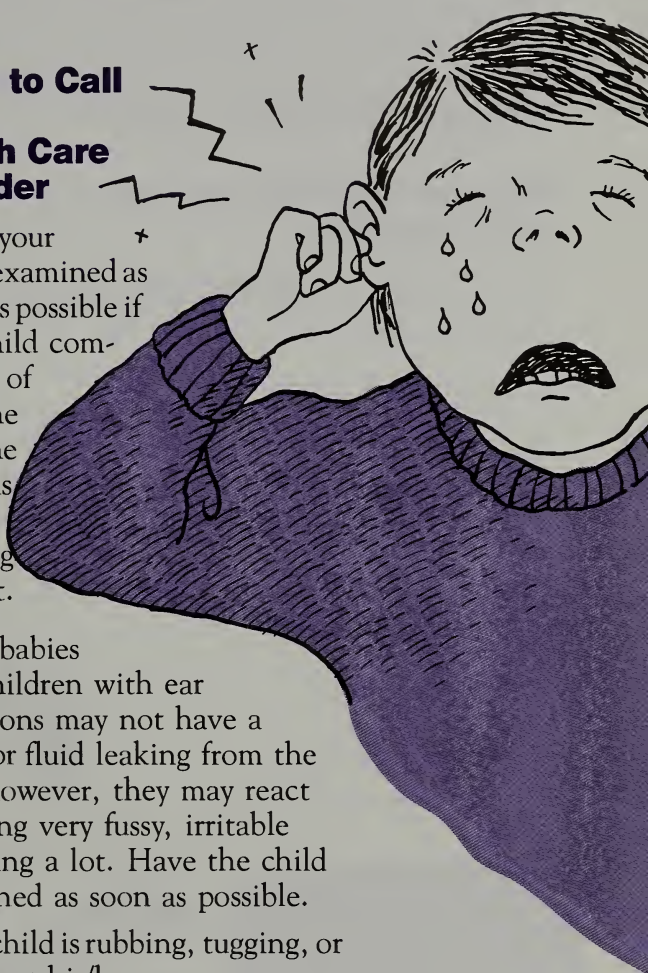
Earaches are caused by an infection or build-up of fluid inside the ear.

When to Call Your Health Care Provider

1. Have your child examined as soon as possible if the child complains of earache or if the ear has fluid leaking from it.
2. Some babies and children with ear infections may not have a fever or fluid leaking from the ear. However, they may react by being very fussy, irritable or crying a lot. Have the child examined as soon as possible.
3. If the child is rubbing, tugging, or pulling at his/her ears.

Caring for Earaches at Home

1. Acetaminophen in the appropriate dose will give temporary relief. However, the child must be seen by a health care provider to determine the cause, so that the correct medicine can be given.

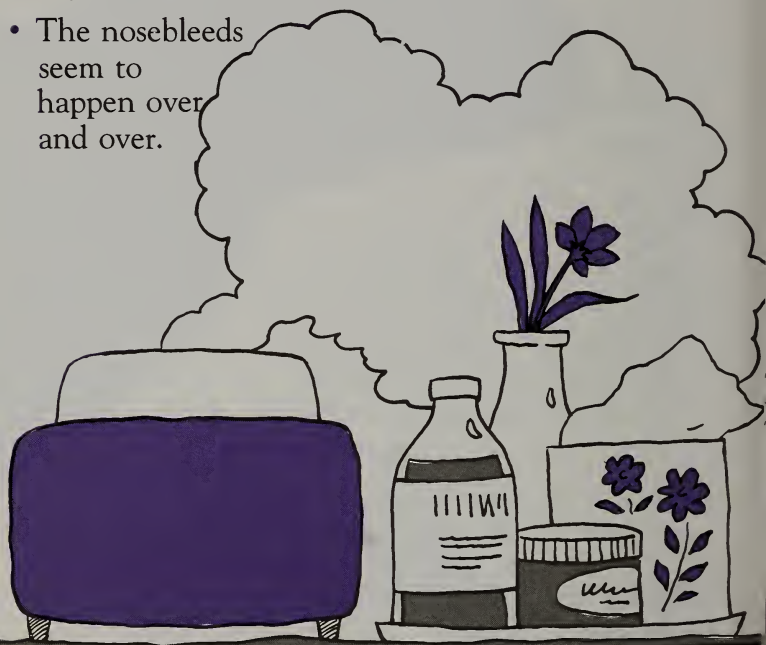


NOSEBLEEDS

Common causes of nosebleeds include colds, over-heated and dry rooms, picking the nose, and injury to the nose. Most nosebleeds will stop by themselves in 5-10 minutes if you follow the suggestions under “Caring for Nosebleeds at Home”.

When to Call Your Health Care Provider

- The nosebleed continues, even after following the instructions under “Caring for Nosebleeds at Home”.
- If there is pain in the nose.
- If you see a foreign object in the nose.
- The nosebleeds seem to happen over and over.



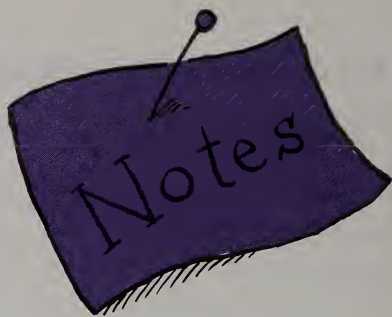
Caring for Nosebleeds at Home

- Have the child sit up, not lie down. There is no need to tilt the head back.
- Pinch the nose below the bony part of the nose — not at the tip or high up near the eyes. Continuously pinch the nose for 5 minutes having the child breathe through the mouth. If bleeding does not stop, resume for 5 more minutes.
- Try to comfort and calm the child because a crying child tends to prolong the bleeding.

Preventing Nosebleeds

- Use a cool mist vaporizer or humidifier a few hours a day.
- Teach the child not to pick or rub his/her nose.
- Before bedtime, put a thin layer of vaseline inside each nostril toward the center of the nose. Repeat for a few nights.





This brochure was adapted from a publication
provided by South Cove Community
Health Center in Boston.

This brochure is available in
English, Chinese, Korean, Laotian,
Samoan, Tagalog and Vietnamese.

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Community Health Organizations,
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This publication was made possible by
✓ Federal grant number MCJ061009 from the
Bureau of Maternal and Child Health.
Additional funding was provided by the
Office of Minority Health.

1992

Illustrated by Ellen Joy Sasaki
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